

Project Budget

Save Draft Mark Complete Close

Please share your project/program budget by completing the template below or attaching a budget that includes details about each entry. For example, if requesting funding for staffing include a breakdown of the positions (*such as: Project Assistant, xx hrs/wk* @ *\$xx/hr*).

Have you applied for other funding for this program? If you have, please include that information in your project budget's Sources section. *

⊙Yes ⊙No

Do you prefer to upload a budget document or complete the template below? *

If uploading your own budget, please include basic details about each category. For example, if your budget includes staff expenses, share the number of positions and the cost for each.

Upload

Template

When completing the budget template enter information in all fields. Entries to the amount field should be in whole dollars, without commas or periods. For fields that have no entry, enter 0 in the amount field, and N/A in the description field. Your Total Expenses should equal your Total Funding.

Expenses

| Category | Amount Requested | Detailed Description | |
|--|------------------|------------------------------|--|
| Personnel Services - Salaries | Amount \$ | Detailed Expense description | |
| Personnel Services - Employee Benefits (such as employer payroll taxes and fringe benefits) | Amount \$ | Detailed Expense description | |
| Purchased Professional and Technical Services (consulting, non-employees, direct admin services, insurance) | Amount \$ | Detailed Expense description | |
| Purchased Property Services (facilities, rental, cleaning) | Amount \$ | Detailed Expense description | |

| | | Detailed Expense description |
|--|-----------|--|
| Other Purchased Services (contracted transportation, grant-related advertising, mileage, travel, admission fees, etc) | Amount \$ | Please Describe |
| Supplies (equipment under \$5,000, consumable materials, etc.) | Amount \$ | Detailed Expense description |
| Other Amount * | Amount \$ | Detailed Expense description Please Describe |
| Indirect/Overhead (up to 10% of the project funds you apply for may be used for overhead/operating expenses.) | Amount \$ | Detailed Expense description Please Describe |
| TOTAL EXPENSES Total Expenses | | Must match total funding |

Sources of Funding

If you do not have funding in a category, enter "0" for the amount and "N/A" for the description.

| Source | Funding Amount | Status |
|--|----------------|--|
| VECF (this should be the same as the "Amount of request" from your application) | Amount \$ | |
| Other grant funding Description | Amount \$ | Applied and awaiting notification Awarded, funds pending Funding Received N/A |
| Donations (non-grant funds) Description | Amount \$ | Funds on hand Active fundraising campaign N/A |

| Loan Description | Amount \$ | Applied and awaiting notification Awarded, funds pending Funding Received N/A |
|----------------------|-----------|--|
| Other Description | Amount \$ | Applied and awaiting notification Awarded, funds pending Funding Received |
| AL FUNDING | <i>Mu</i> | st match total expenses |